

**EARLY CHILDHOOD TRANSITION FROM
PART C EARLY INTERVENTION TO
PART B SPECIAL EDUCATION AND OTHER SERVICES
FOR YOUNG CHILDREN WITH DISABILITIES**

**TECHNICAL ASSISTANCE DOCUMENT
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**Infant & Toddler
Connection of Virginia**

**Virginia Department of Mental Health,
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TABLE OF CONTENTS

| | |
|--|----|
| Introduction..... | 6 |
| Background: Statutory and Regulatory Basis..... | 7 |
| Regulations, Policies and Procedures..... | 7 |
| Lead Agencies..... | 8 |
| Interagency Coordinating Council..... | 8 |
| Interagency Agreements..... | 9 |
| Local Early Intervention Systems..... | 9 |
| Provision of Services to Children and Families..... | 9 |
| The Transition Process in Virginia..... | 10 |
| Required Steps for Transition..... | 10 |
| Special Considerations in Transition..... | 10 |
| Age of Transition..... | 10 |
| Key Characteristics of Early Intervention Systems..... | 12 |
| Scope of Services..... | 12 |
| Cost of Services..... | 12 |
| Service Delivery Settings..... | 12 |
| Participation of Family Members..... | 15 |
| Key Characteristics of Early Childhood Special Education Services..... | 15 |
| Scope of Services..... | 15 |
| Cost of Services..... | 15 |
| Service Delivery Settings..... | 16 |
| Participation by Parents..... | 16 |
| Challenges in Transition Decisions..... | 16 |
| Age of Transition..... | 16 |
| Differences in Services..... | 16 |
| Differences in Personnel..... | 17 |
| Transition Activities..... | 17 |
| Coordination Between and Among Service Providers/Agencies..... | 17 |
| Planning for Individual Transitions..... | 18 |
| Transmitting Information to the Public School..... | 18 |
| Preparing the Child for Changes in Service Delivery..... | 18 |
| Supporting the Family in Transition..... | 19 |
| Exploring Community Options..... | 21 |
| Transition Events and Timelines..... | 21 |
| Coordination Between and Among Service Providers..... | 22 |
| Coordination for Each Child and Family..... | 22 |
| Children Transitioning to Part B..... | 22 |
| Timelines..... | 22 |
| Transmission of Information..... | 24 |
| Transition Conference..... | 24 |
| Child Study..... | 25 |
| Evaluation..... | 25 |
| Eligibility Determination..... | 26 |

| | |
|--|----|
| IEP Development..... | 27 |
| Timelines for IEP Meeting..... | 27 |
| IEP Meeting Participants..... | 27 |
| IEP Considerations | 28 |
| IEP Content..... | 28 |
| Procedural Safeguards | 29 |
| IEP Initiation..... | 30 |
| Enrollment in School..... | 30 |
| Children Transitioning to Other Settings | 32 |
| Children Moving to Different Localities..... | 32 |
| Children with IFSPs Who Move Within Virginia | 32 |
| Children with IFSPs Who Move Out-of-State..... | 32 |
| Two- to Three- Year Old Children with IEPs Who Move Out-of-State | 33 |
| Children Who Move to Virginia..... | 33 |
| Interagency Agreements..... | 35 |
| Transition Questions and Answers..... | 38 |
| References..... | 41 |
| Appendices | 42 |
| Definitions..... | 43 |
| Sample of Completed Transition Planning Page..... | 50 |

READER'S GUIDE

Throughout this document, state-level policy, procedures, regulations, and statements from interagency agreements are noted in *italics*. CFR denotes the Code of Federal Regulations, the regulations published by each federal regulatory agency.

In this document, Part C of Individuals with Disabilities Education Act (IDEA), Early Intervention, is abbreviated EI and refers to services for infants and toddlers from birth through age 2; Part B of IDEA, Early Childhood Special Education is abbreviated ECSE and refers to special education and related services for children, age 2 through 5 years of age.

The term 'parents' is used to refer to a child's parent or parents, guardian, surrogate parent or parents, or person acting in the place of a parent.

The two documents that reflect both state and federal requirements and form the foundation and regulatory basis for this document are:

- 1) *Policies and Procedures for the Implementation of Part C of the Individuals with Disabilities Education Act (IDEA), 2000* (copies can be obtained from the Web site at www.infantva.org); and
- 2) *Regulations Governing Special Education Programs for Children with Disabilities in Virginia, effective March 27, 2002* (copies can be obtained from the Virginia Department of Education (VADOE) or downloaded from the VADOE Web site at www.pen.k12.va.us/VDOE/sess/).

INTRODUCTION

Purpose

This document has been written to:

- Assure that all young children and their families in the Commonwealth of Virginia have equal access to timely and effective transition services;
- Strengthen collaboration, communication, and information sharing among Part C, Part B, parents/families, and other community providers;
- Clarify policy and regulations on transition from Part C (early intervention) to Part B (early childhood special education) and other community options in Virginia; and
- Recommend practices and strategies to support effective transitions in local community contexts.

Although this document focuses on transition from Part C to Part B, early childhood special education services are but one of a variety of options for young children transitioning from early intervention services. Other community resources also should be explored for each child and family in transition.

BACKGROUND: STATUTORY AND REGULATORY BASIS

The federal statutes and regulations supporting the Individuals with Disabilities Education Act (IDEA of 1997) charge states with specific responsibilities for serving young children with disabilities. Each state is responsible for ensuring services are available to eligible children from birth through age 5 through Part C or Part B.

Regulations, Policies, and Procedures

Federal regulations in IDEA require states to develop transition policy, procedures, and practices to ensure smooth transitions for children exiting Part C services. State-level policy and procedures must address the establishment and coordination of the transition process, including transition planning, support for families, and training for providers.

Federal Regulations for Assistance to States for the Education of Children with Disabilities stipulate that the state must have on file with the United States Department of Education (USDOE) policies and procedures to ensure that:

- a) Children participating in early intervention programs assisted under Part C of the Act and who will participate in preschool programs assisted under Part B of the Act, experience a smooth and effective transition to those preschool programs in a manner consistent with Sec. 637(a)(8) of the Act;*
- b) By the third birthday¹ of a child described in paragraph (a) of this section, an IEP [Individualized Education Program] or, if consistent with Sec. 300.342 (c) and Sec. 636(d) of the Act, an IFSP [Individualized Family Service Plan] has been developed and is being implemented for each child consistent with Sec. 300.121(c); and*
- c) Each LEA [Local Educational Agency] will participate in transition planning conferences arranged by the designated lead agency under Sec. 637(a)(8) of the Act.*

[34 CFR § 300.132]

The federal regulations for Part C of IDEA also delineate steps to support the child and family in transition. As per the regulations, each child and family's IFSP must:

- 1) Include the steps to be taken to support the transition of the child to:*
 - i) Preschool services under Part B of the Act, in accordance with Sec. 303.148, to the extent that those services are considered appropriate;*
 - ii) Other services that may be available, if appropriate.*
- 2) The steps required in paragraph (h)(1) of this section include:*

¹ For a discussion of Virginia's policy regarding age of transition, see "Special Considerations in Transition: Age of Transition".

- i) *Discussions with, and training of, parents regarding future placements and other matters related to the child's transition;*
- ii) *Procedures to prepare the child for changes in service delivery, including steps to help the child adjust to, and function in, a new setting; and*
- iii) *With parental consent, the transmission of information about the child to the local educational agency, to ensure continuity of services, including evaluation and assessment information required in Sec. 303.322, and copies of IFSPs that have been developed and implemented in accordance with Sec. 303.340 - 303.346.*

[34 CFR § 303.344(h)]

State-level policies and procedures must include the minimum components required by applicable federal regulations and statutes. In Virginia, state-level policies and procedures for Part C are set forth in the document *Commonwealth of Virginia Policies and Procedures for the Implementation of Part C of the Individuals with Disabilities Education Act (IDEA) 2000*. State-level regulations for Part B are found in the *Regulations Governing Special Education Programs for Children with Disabilities in Virginia*.

Lead Agencies

Each state is required to identify lead agencies to ensure the delivery of programs and services according to the federal regulations supporting Parts C and B of IDEA. The designated lead agency may be the same agency for both parts of the Act or two different agencies. In Virginia, the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) is the lead agency for Part C (early intervention services). The Virginia Department of Education (VADOE) is the lead agency for Part B (early childhood special education programs). Both agencies (DMHMRSAS and VADOE) are ultimately accountable to the Office of Special Education Programs (OSEP) of the United States Department of Education (USDOE). They must ensure services and programs provided to eligible children and families under IDEA meet federal requirements in order to receive financial assistance.

Interagency Coordinating Council

Each state receiving financial assistance under Part C of IDEA is required to establish a state-level interagency coordinating council (ICC) to provide advice and assistance to the lead agency and other agencies involved in the providing or paying for early intervention services. In Virginia, the Virginia Interagency Coordinating Council (VICC) fulfills this requirement. Representatives include parents, public or private providers of early intervention services, state agency personnel, a legislator, and an individual involved in personnel preparation. As part of their mission, the VICC offers advice and guidance to ensure the implementation and evaluation of the statewide system of early intervention services, including the transition of toddlers with disabilities to preschool and other appropriate services (*Policies and Procedures for Implementation of Part C of IDEA, 2000*).

Interagency Agreements

Interagency agreements among lead agencies in each state support the implementation of transition policy and procedures and provide guidelines for local interagency transition practices. Requirements for interagency agreements are found in Parts B and C (20 U.S.C. 1400 et seq.) of IDEA. Requirements for interagency agreements also are set forth in Head Start Program Performance Standards on Services to Children with Disabilities 1993 (45 CFR 1308) related to local agreements and in Head Start Program Performance Standards of 1996 (45 CFR 1304) related to community partnerships. (See “Interagency Agreements” pp. 36-38 for a discussion of Virginia’s interagency agreements.)

Local Early Intervention Systems

Federal regulations uphold the importance of local systems in ensuring effective transitions for each child and family. The federal requirements also specify that local early intervention service system transition policies and procedures must be consistent with state policy and must ensure smooth transition for infants, toddlers, and their families.

There are 40 local interagency coordinating councils (LICC) in Virginia that coordinate Part C early intervention systems at the local level. LICCs are required to develop local interagency agreements for full implementation of IDEA, including transition. Participants in the LICCs must include both local early intervention service providers and LEA personnel. Interagency agreements developed by LICCs must reflect state-level policies and procedures for transition between sending and receiving agencies as children and families enter or exit the early intervention system (*Policies and Procedures for the Implementation of Part C of IDEA, 2000*).

Provision of Services to Children and Families

When eligibility has been determined, both Parts B and C require a written plan of service. An Individualized Family Service Plan (IFSP) must be developed for each child and family prior to implementation of early intervention (Part C) services. An Individualized Education Program (IEP) must be developed for each child prior to the initiation of Part B services through the public school system.

Currently in Virginia, there are community-based early intervention services (Part C) in each of the 40 Community Services Board jurisdictions. Services are available through public and private agencies/providers. Each of Virginia’s 132 public school divisions offers a range of early childhood special education programs. Public school divisions are accountable to their local school boards.

THE TRANSITION PROCESS IN VIRGINIA

Required Steps for Transition

State-level policy and procedures reflect the Part C federal requirements for transition. As per the federal regulations and restated in Virginia Part C policies and procedures, the steps for transition include:

- 1) *Timelines;*
- 2) *Discussion with, and training of, parents regarding future placements and other matters related to the child's transition;*
- 3) *Transmission, unless the parents disagree, of the child's name, address, telephone number, and birth date to the LEA in which the child resides as the child becomes age eligible for Part B;*
- 4) *Procedures to prepare the child for changes in service delivery, including steps to help the child adjust to, and function in the new setting;*
- 5) *The transfer of child-specific information, with parental consent, to the local educational agency (LEA), or to other local early intervention systems within Virginia or other state early intervention systems, to ensure continuity of services, including evaluation and assessment information required in Sec. 303.322, and copies of IFSPs that have been developed and implemented in accordance with Secs. 303.340 through 303.346; and*
- 6) *The Part B eligibility process.*
(Policies and Procedures for the Implementation of Part C of IDEA, 2000).

Special Considerations in Transition

Age of Transition

Although Virginia policies and procedures for transition from early intervention services (EI) reflect federal requirements, one notable difference is the age at which children are eligible to transition from Part C to Part B services. According to federal regulations, children are age-eligible for Part C (EI) services until their third birthday. In Virginia, EI service providers and public school divisions both have responsibility for serving eligible children ages 24 to 36 months. If eligible for both Parts C and B, parents decide whether their child remains in Part C or transitions to Part B; however, a child may not receive Part C and Part B services concurrently.

In Virginia, children are age-eligible for ECSE services in local educational agencies (LEA) at age 2. The cut-off date for age-eligibility is September 30. Children who are 2 years of age on or before September 30 of a particular school year are age-eligible for services under Part B of IDEA for that school year. Children who become 2 any time after September 30 are not age-eligible for Part B services until the next school year. If a child meets eligibility requirements and parents choose to enroll their child in Part B services, the child transitions to ECSE services in the public schools at age two.

Not all children in Virginia transition to Part B programs at age 2. There are several reasons why a child may not transition at age 2:

1. Some children may be eligible under Part C but do not meet eligibility criteria for Part B programs (See Table 1, pg 13, for a comparison of eligibility criteria.). These children may continue to receive Part C services if they turn two on or before September 30 of a particular school year and do not meet other eligibility criteria for Part B. These children do not transition to the public schools' early childhood special education program.
2. Some parents choose for their children to continue to receive Part C services through age 2, even if they meet eligibility requirements for Part B. Virginia policies and procedures for Part C enable children to receive EI services until their third birthday if they continue to meet other criteria for services.
3. Some parents do not consent to a referral, evaluation, or placement under Part B. Their children may continue to receive Part C services until parental consent for evaluation or placement is given or their child reaches their third birthday. At age 3 or at such time the parent(s) consent to an evaluation or placement, these children transition to Part B programs or other services or programs in their communities.

The lead agency for Part C services in Virginia (DMHMRSAS) ensures the continuation of appropriate EI services until the third birthday for children who are:

- 1) *Eligible for services under Part C but not eligible under Part B;*
- 2) *Eligible for Part B services but whose parents do not consent to placement under Part B and choose to delay transition to a future time before the child reaches age three;*
- 3) *Age eligible for Part B services but whose parents do not consent to an evaluation.*

(Policies and Procedures for the Implementation of Part C of IDEA, 2000).

Each child and family's IFSP team ensures that IFSPs for children not transitioning to Part B at age 2 include “ *the identification of possible future placements and strategies for successful transition as a transition step.*” The service coordinator or other designated person is “*responsible for helping the family locate and access other services as appropriate*” unless a family chooses not to seek alternate future placements (*Policies and Procedures for the Implementation of Part C of IDEA, 2000*).

Key Characteristics of Early Intervention Services

Differences between EI and ECSE services can influence the decisions made by each family regarding when their child will transition from Part C services. It may be helpful for parents and other family members and service providers to have information on the characteristics of Part C and Part B services as they plan for transition. (See Table 1, pg. 13, for a summary comparison of EI services and ECSE programs.)

Scope of Services

EI services are provided within the context of Individualized Family Service Plans (IFSPs). Entitled Part C services that must be provided at no cost to families include implementation of child find requirements, evaluation and assessment, service coordination, and review and evaluation, as well as implementation of procedural safeguards. Additional entitled Part C services (for which fees may be charged) include special instruction, occupational therapy, physical therapy, speech-language therapy, nutrition services, vision services, orientation and mobility, and social work services. A local collaborative network of public and private agencies provides these entitled services. Service providers agree to adhere to state and local policies and procedures for the implementation of EI services. A complete list of EI service providers is listed in Table 1 on page 14.

Cost of Services

The Lead Agency ensures that some EI functions and services are provided at no cost to families. According to Virginia's policies and procedures for Part C, child find, evaluation and assessment, service coordination, and administrative and coordinating activities related to the development, review, and evaluation of IFSPs and implementation of procedural safeguards are carried out at public expense in Virginia. Direct services, with the exception of service coordination, may be subject to fees. Services subject to a schedule of charges/fees include, but are not limited to, assistive technology, audiology, vision services, special instruction, speech-language therapy, occupational therapy, and physical therapy; however, families cannot be denied services due to inability to pay (*Policies and Procedures for the Implementation of Part C of IDEA, 2000*).

Service Delivery Settings

Part C of IDEA requires EI services to be provided in natural environments; that is, natural settings where the child's age peers without disabilities participate. In Virginia, services in natural environments must be provided within the context of learning opportunities occurring within the daily activities of the child and family. Such opportunities exist in a variety of locations including the home, childcare center, family daycare home, preschool program, local park or recreation center, playgroup, and library story time. Services provided during these activities and routines maximize opportunities for learning and practicing new skills in a natural setting. Since EI services are designed to be developmentally relevant and to meet the outcomes on each child and family's IFSP, the natural environments for service delivery may differ from one child and family to another.

Table 1: Comparison of Early Intervention and Early Childhood Special Education Services in Virginia

| | Early Intervention | Early Childhood Special Education |
|-----------------------------|--|--|
| <u>Lead Agency</u> | DMHMRSAS | VADOE |
| <u>Age of Eligibility</u> | Birth through age 2 | Age 2 through 5 |
| <u>Eligibility Criteria</u> | <p><u>Part C</u></p> <p>A. Children with a developmental delay, defined as:</p> <ol style="list-style-type: none"> 1. <i>Children who are functioning at least 25% below chronological or adjusted age in one or more of the following areas:</i> <ol style="list-style-type: none"> a. <i>cognitive development;</i> b. <i>physical development (including fine motor, gross motor, vision, and hearing);</i> c. <i>communication development;</i> d. <i>social or emotional development;</i> e. <i>adaptive development.</i> <p style="text-align: right;">(34 CFR § 303.16(a)(1))</p> <p style="text-align: center;">OR</p> <ol style="list-style-type: none"> 2. <i>Children who manifest atypical development or behavior, which is demonstrated by one or more of the following criteria (even when evaluation does not document a 25% development delay);</i> <ol style="list-style-type: none"> a. <i>Abnormal or questionable sensory-motor responses, such as:</i> <ol style="list-style-type: none"> 1) <i>abnormal muscle tone;</i> 2) <i>limitations in joint range of motion;</i> 3) <i>abnormal reflex or postural reactions;</i> 4) <i>poor quality of movement patterns or quality of skill performance;</i> 5) <i>oral-motor skills dysfunction, including feeding difficulties;</i> b. <i>Identified affective disorders, such as:</i> <ol style="list-style-type: none"> 1) <i>delay or abnormality in achieving expected emotional milestones;</i> 2) <i>persistent failure to initiate or respond to most social interactions;</i> 3) <i>fearfulness or other distress that does not respond to comforting by caregivers;</i> 4) <i>Behavioral disorders that interfere with the acquisition of developmental skills</i> | <p><u>Part B</u></p> <p>Children may be found eligible under one or more of 14 disability categories, which are defined in the federal and state regulations:</p> <ol style="list-style-type: none"> 1. autism 2. deaf-blindness 3. emotional disturbance 4. hearing impairment/deaf 5. learning disabilities 6. mental retardation 7. multiple disabilities 8. orthopedic impairment 9. other health impairment 10. severe disabilities 11. speech or language impairment 12. traumatic brain injury 13. visual impairment 14. developmental delay – a disability affecting a child (ages two through eight) who is: <ol style="list-style-type: none"> a) experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and b) by reason thereof, needs special education and related services. <p>The level of developmental delay considered significant is determined by each school division.</p> <p>Children are not required to be identified by their disability, as long as each child has a disability and by reason of that disability, needs special education and related services.</p> <p style="text-align: right;">(34 CFR § 300.125(d))</p> |

Table 1: Comparison of Early Intervention and Early Childhood Special Education Services in Virginia (cont'd.)

| | | |
|---|---|---|
| | <p>3. Children who have a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay.</p> <p>(34CFR 303:16 (1)(2))</p> <p><i>(Policies and Procedures for Implementation of Part C of IDEA-2000)</i></p> | <p><i>(Regulations Governing Special Education Programs For Children with Disabilities in Virginia)</i></p> |
| <u>Parental Participation in Meetings</u> | Required at initial eligibility and initial IFSP meeting and subsequent IFSP meetings. | Required at initial eligibility and IEP meeting. |
| <u>Written Document</u> | IFSP (Individualized Family Service Plan) | IEP (Individualized Education Program) |
| <u>Initiation of Services</u> | Services may not commence until evaluation, eligibility determination, and IFSP development are complete and parents have signed consent for the services to begin. | Services may not commence until evaluation, eligibility determination, and IEP development are complete and parents have signed consent for the services to begin. |
| <u>Cost of Services</u> | EI functions and services provided at no cost to families are: child find; evaluation and assessment; service coordination; and administrative and coordinating activities related to development, review, and evaluation of IFSPs and implementation of procedural safeguards. Entitled services, with the exception of service coordination, are subject to a schedule of fees. | Identification, evaluation, and all services specified on the IEP are provided at no cost to parents. |
| <u>Location of Services</u> | Natural environments including, but not limited to: home, child care center, Early Head Start, playgroup, public or private preschool, local park or recreation center, library story time. | The least restrictive environment for each child including: home, school-based preschool program; special education classroom (speech-language therapy room); integrated preschool, Head Start, and other settings determined by the IEP team. |
| <u>Service Providers</u> | Therapeutic recreation therapist, occupational therapist, OT assistant, physical therapist, PT assistant, speech-language pathologist, counselor, psychologist, social worker, audiologist, early childhood educator, early childhood special educator, educational interpreter, educator of children with hearing impairments, educator of children with visual impairments, registered nurse or nurse practitioner, nutritionist, orientation and mobility specialist, physician, visiting teacher, and early intervention assistant. | Early childhood special educator, speech-language pathologist, occupational therapist, physical therapist, paraprofessional, teacher of children with hearing impairment/deafness, teacher of children with visual impairments, audiologist, and school psychologist or other qualified personnel identified by the IEP team. |

Participation of Family Members and Caregivers

Involvement of the parent, parents, other family members or caregivers is the foundation of EI services. Family-identified resources, priorities, and concerns are important considerations in IFSP development. Parents, grandparents, and other caregivers are an integral part of providing early intervention service within the child's daily activities and routines.

Key Characteristics of Early Childhood Special Education Services

Scope of Services

ECSE services are provided within the context of individually designed educational programs (IEPs). The provision of services specified on each IEP is assured by the local school division.

The specific services provided by the public school are determined by each child's individual strengths and needs identified during the evaluation process and IEP process. Placement options are determined by each child's goals and objectives or benchmarks. A variety of options are considered by the IEP team to meet the individual needs of children who transition from EI services to the public schools. The public school division, through the IEP team, ensures that the principle of least restrictive environment (LRE) guides the decision concerning the setting for providing the services needed to meet the goals and objectives on each child's IEP. To the maximum extent appropriate, children with disabilities are educated with children who are not disabled. Children are removed from the general educational environment only when education in regular classes cannot be achieved satisfactorily; however, most school divisions do not have general education options for preschoolers who do not have disabilities or are at-risk (see Appendix for complete definition of LRE). The LRE must be determined individually for each child. There is no single educational environment that is appropriate for all preschool children. (*Regulations Governing Special Education Programs for Children with Disabilities in Virginia*)

ECSE services may include, but are not limited to, visits by an early childhood special educator and/or therapist to the child's home, daycare provider's home, childcare center, or private or public preschool (including Early Head Start or Head Start). In some localities integrated preschool programs are available in which an early childhood special educator makes scheduled visits to provide on-site services to children with IEPs or consults regularly with program staff. Integrated preschool programs can offer the necessary level of support for many children and families while serving the children in the LRE.

Service coordination is not a required component of ECSE programs as it is for EI services. In lieu of a service coordinator, some school divisions designate a case manager on the child's IEP who coordinates scheduling of meetings and may be responsible for informing parents of such meetings. The case manager assures service delivery of the IEP and may serve as the parents' initial contact within the school system if they have questions, concerns, or requests regarding their children's IEPs. The person designated as case manager is usually the person having the most contact with the child (e.g., teacher or speech-language pathologist).

Transportation may be a related service available to preschool children at no cost to parents. In some localities, parents transport children to and from services and receive reimbursement for mileage. Children who attend school-based preschool programs may be transported by public school transportation.

Cost of Services

All services included on a child's IEP must be provided under the direction and supervision of the public school division at no cost to parents.

Service Delivery Settings

Some preschool children come to public schools to receive services. These services may range from coming to school for monthly or weekly therapy sessions to participating in an ECSE program. The frequency and duration of a child's participation in services are determined by individual needs in keeping with the principle of providing services to all children in the LRE. The IEP team makes decisions regarding specific services needed by a child and the appropriate setting for delivery of each service.

Children in school-based ECSE programs who also need speech-language, occupational or physical therapy, or specialized instruction from a vision specialist, audiologist, or teacher of children with hearing impairments may receive those services within the classroom setting. Teaching assistants or paraprofessionals working under the supervision of ECSE teachers also provide services to children in school-based programs.

Some children's needs may be met appropriately through consultative services. In this model, the teacher, therapist, or specialist consults with parents periodically to monitor the child's progress and offer suggestions for enhancing skill development at home or in preschool or childcare settings. With parental permission, as specified on the child's IEP, preschool personnel may consult with a child's preschool teacher, childcare provider, or other family members to provide suggestions.

Participation by Parents

As in EI, parents are considered a vital support to their children's ECSE programs. The role of parents whose children transition to Part B services varies with the type of services included in the child's educational program. Parents whose children continue to receive home-based services may not perceive a change in their roles. They will continue to have the opportunity to be present each time their child receives services. Parents of children receiving services at a public school may see their roles change. If parents transport their children to and from weekly therapy sessions, they may have opportunities to be directly involved; however, parents whose children are transported to and from classroom programs may not have as much direct contact with the service providers on a regular basis. For this reason, ECSE teachers strive to maintain frequent contact with parents through written journals and periodic telephone calls.

Challenges in Transition Decisions

Age of Transition

An initial challenge for parents is making the choice about when their child will transition from Part C to Part B services. Parents need a sound basis for making this decision. EI service providers can guide parents in obtaining information needed to make this choice. ECSE service providers also can help by providing information about their programs. All persons involved in transition must keep in mind that the question of when to transition must be addressed individually for each child and family.

Differences in Services

After a decision is made for a child to transition to Part B services in the LEA and the child is found eligible for services, an IEP is developed. Each child's needs, as set forth by individualized goals and objectives on the IEP, will drive the services provided by the public schools, including the frequency, intensity, type, and location of services. Children transitioning from Part C will have received services in a variety of natural environments. ECSE services are provided in many of the same settings. Parents whose children continue to receive home-based services might expect them to be a direct continuation

of EI services. While continuity in services is desirable, differences exist in the type and frequency of service delivery as well as in the kinds of activities and materials used. These differences, along with new service providers, may prove challenging for children and families.

Children and families who transition from one type of service delivery system to another are faced with the challenge of adjusting to new people, different service delivery methods, and new environments. Parents may have preconceived notions of school-based services, which may be different from what actually occurs in these settings. Since school-based ECSE programs often are located in elementary school buildings, teachers direct the programs and children may use public school transportation to and from the programs, parents may expect them to be similar to kindergartens. In fact, ECSE programs are based on developmentally appropriate practices for preschool-age children that meet each child's individual needs. All activities, whether provided at home, in a daycare setting, or at a school, are driven by each child's IEP. It is important for parents to have opportunities to learn about the nature of different types of programs and the types of activities that will be available for their children, based on their individual needs.

Differences in Personnel

Personnel who deliver services vary within each system or program. Different staffing patterns are used in different localities. Parents whose children have received EI services might expect certain services, such as facilitating the development of fine motor skills or communication skills, to be provided by a therapist. In ECSE programs a teacher or paraprofessional may be the staff member responsible for providing these services. Thus, a common challenge for parents is understanding and adjusting to a different method of service delivery and differences in the types of providers delivering various services. Parents may be assured, however, that personnel who deliver services under Parts B or C have adequate training prescribed by each lead agency. Providers who deliver EI services must meet the highest entry-level standard in Virginia for their profession or discipline.² Assistants who are appropriately trained and supervised may assist in the provision of EI services (Policies and Procedures for Implementation of Part C of IDEA, 2000). Personnel who provide ECSE services must meet state licensure requirements for the service(s) they provide, in accordance with the Virginia Licensure Regulations for School Personnel (see the Virginia Department of Education Web site at: <http://www.pen.k12.va.us/>).

Although the differences in service delivery models between EI services and ECSE programs present challenges during transitions, these challenges can be minimized. Early transition planning, opportunities for parents to learn about the full range of service delivery options, consistent support of parents and children throughout the process, and interagency collaboration and cooperation will help each child and family to transition smoothly to the next setting.

Transition Activities

Coordination Among Service Providers/Agencies

Prior to planning individualized transition activities for each child and family, broad-based transition

² "Highest requirements in the State applicable to a specific profession or discipline" means the highest entry-level academic degree needed for any State approved or recognized certification, licensing, registration, or other comparable requirements that apply to that profession or discipline. (34 CFR § 303.361 (a)(2))

(Policies and Procedures for the Implementation of Part C of IDEA, 2000).

planning takes place among sending and receiving programs and agencies. Examples of such activities include:

- coordinating the referral process (establishing timelines; identifying specific personnel responsible for making and receiving referrals; identifying forms to be used);
- scheduling reciprocal site visits between sending and receiving personnel;
- providing collaborative training for parents regarding the transition process; and
- sharing and updating information about services and programs.

LICCs help coordinate transition activities among service providers in the community and evaluate the effectiveness of local interagency agreements in fostering smooth transitions.

Planning for Individual Transitions

Early planning is an important step in transition. Preparation for transition begins with discussions the day the child and the family's first IFSP is written. The lead agency for Part C assures that each child and family's IFSP includes a component related to transition. This component is outlined on a Transition Planning page (see Figure 1, pg 20) identifying eight activities that must take place when planning for transition. As part of the initial IFSP process, the IFSP team addresses transition from Part C, discussing what transition from EI means and what parents can do to plan for this transition (Figure 1, item 1). Eligibility and age guidelines for EI services are discussed so parents understand when their child may no longer be eligible for Part C (Figure 1, item 2) and when to anticipate transition from EI services.

Transmitting Information to the Public School

The Part C service coordinator or designee is responsible for notifying the school division of children residing in the community who are potentially eligible for Part B services. Parents are informed in writing through the IFSP Transition Planning page that the locality intends to notify the public school division in which the child resides of the child's name, address, telephone number, and birth date prior to the child reaching the age of eligibility for special education (Figure 1, item 3). The notice includes the date on which the locality intends to send information to the public school division. Unless the parents indicate in writing on the IFSP transition page that they do not want the information transmitted, it is forwarded to the public school division by the locality at the appropriate time (Policy Pages, July 2001).

In addition to informing parents of the intent to transmit identifying information about the child to the public school division, each child and family's IFSP must include the steps to be taken to support the transition of the child to preschool services under Part B, to other appropriate services, or to no further services as appropriate. These activities are written on the Transition Planning page (Figure 1, item 8). There also is space on this page to identify any additional steps desired or needed by the child and family.

Preparing the Child for Changes in Service Delivery

Steps are identified on the IFSP to help the child adjust to and function in the new setting (Figure 1, item 5). Examples of skills to help a child in the next environment are:

- communicating with others with gestures, spoken language, sign language, or other communication systems (i.e. pictures, sound output devices);
- making simple choices;

- asking for help when needed;
- following simple directions;
- engaging in parallel play;
- assisting with self-help tasks such as taking off coat;
- playing outside on the grass or playground equipment;
- separating from the parent;
- using toys appropriately;
- looking at books; and
- listening to stories.

As with all outcomes on the IFSP, the skills identified to help the child succeed in the next setting are selected individually. The identified skills are based on the child's present developmental level in conjunction with the family's resources, priorities, and concerns.

Families are instrumental in helping their children prepare for a change in service delivery. Strategies families have used to prepare their child for the next environment include:

- taking their child to meet the new program staff and see the new environment;
- giving their child experience being around other young children;
- giving their child experience playing and interacting with other children in a group; and
- practicing short separations from the child by leaving her in the care of a responsible adult.

Supporting the Family in Transition

Along with child-focused transition activities, an important step identified on the IFSP is helping the family prepare for changes in services and move smoothly from one service delivery system to another (Figure 1, item 8). The level and type of participation will vary among families. Since families' needs and desire for support differ, a variety of options should be available to help families gain knowledge about the transition process. The service coordinator ensures that the family is included in any transition planning conference and that the family is assisted in identifying the steps to be taken to support them in the transition process. Service coordinators may help parents identify how they want to be involved in their child's transition and establish their priorities and concerns regarding transition (*Policies and Procedures for Implementation Part C of IDEA, 2000*).

Figure 1: Transition Planning Page

Child's Name: _____



Infant & Toddler
Connection of Virginia

IFSP Date: _____

DOB: _____

Page 7

VI. Transition Planning

| TRANSITION PLANS AND ACTIVITIES | PERSON RESPONSIBLE | DATE STARTED | DATE COMPLETED |
|--|--------------------|--------------|----------------|
| ? 1. Discuss what "transition" from early intervention means and what we can do to plan for this transition. | | | |
| ? 2. Discuss eligibility and age guidelines for early intervention so we understand when our child may no longer be eligible for early intervention services. | | | |
| ? 3. Our child's name, address, phone number and birth date will be sent to the school division no later than _____ unless we disagree. I do not want this information transmitted Par. Initials/Date _____ | | | |
| ? 4. Help us explore preschool special education services as well as other community program options for our child, including: eligibility for the program, the latest date a referral may be made to the program to ensure we don't have a gap in services, and who we can talk to for more information. (Latest date: _____) | | | |
| ? 5. Help our child begin to learn new skills needed to better get along in the new place (see Outcome (s) # _____). | | | |
| ? 6. With our permission, provide specific information to the future service provider or program (e.g., assessment reports, IFSP, etc.) | | | |
| ? 7. Schedule a meeting with our family, service coordinator, and someone from the new program to plan how we are going to make the transition. | | | |
| ? 8. Help our child and family prepare for changes in services so that we can move smoothly from one program to another (e.g., meet a new teacher, visit a classroom, talk by phone to a program in the area where we are moving). | | | |
| Additional Steps | | | |

Examples of activities to support the family in preparing for transition include:

- helping the family members identify their questions, desires, and concerns regarding transition;
- providing written explanations of the transition process and timelines and the public school's referral process;
- providing descriptions of future program options;
- facilitating contact with a parent whose child already has made the transition;
- facilitating contact with a representative of the local Special Education Advisory Committee;
- arranging meetings with a new teacher or service provider;
- scheduling a visit to a classroom;
- providing information on the skills needed by the child in the next environment;
- helping the family compile and organize the paperwork needed by the receiving program;
- referring the parents to a Parent Resource Center or to the Infant & Toddler Connection of Virginia Family Involvement Project³;
- talking by phone to a service provider in the locality to which a family is moving;
- providing videotape with transition information specific to the locality;
- providing information or training on specific topics such as parent-professional partnerships; families as equal partners; support and involvement of siblings and other family members; and legal rights and advocacy.

Parent information and training can be provided in a variety of ways such as workshops or seminars, resource libraries, videotapes, parent-to-parent groups, or individual parent-to-parent contacts.

Exploring Community Options

A critical part of transition planning is providing parents with information regarding future placements and transition service options (Figure 1, item 4). It is essential for the IFSP team to consider a variety of future options for each child. Not every child receiving EI services will transition to ECSE services in the public schools. The most appropriate type, location, and intensity of service delivery must be determined individually for each child who is ready to transition. While some children transition to services provided by the public schools, others transition to Early Head Start or Head Start programs, community preschools and child care centers, private preschool and child care centers, or family day care homes. Some children may no longer need special services and will transition out of services.

Transition Events and Timelines

Discussion of transition begins at the initial Individual Family Services Plan (IFSP) meeting and is a component of every IFSP throughout the child and family's participation in Part C services. Specific dates have been established for activities to take place to enable transition in a timely manner. The timelines may differ depending on the type of transition that will occur -- to Part B services, to other community services, or to no further services. As specified on the Transition Planning Page of each IFSP, the latest date a referral may be made to a potential receiving program should be discussed throughout the transition planning process in order to prevent an unnecessary gap in services. (Figure 1, item 4).

³ Parents may access Parent Resource Centers (PRCs) at any time, regardless of the age of their child. EI service coordinators may refer parents to PRCs, which exist in many of Virginia's school divisions. The Parent Educational Advocacy Training Center (toll free phone number - 800/869-6782) in Richmond and Alexandria provides support to all areas of the state. The Infant & Toddler Connection of Virginia Family Involvement Project provides support and information to families in the Part C early intervention system. Their toll free telephone number is 1-888-604-2677, ext. 3 and their website is www.arcfip.org.

Coordination Between and Among Service Providers

The coordinated efforts of many individuals are necessary for successful transitions. The many and varied activities that precede the child's entry into the new program or services require careful planning and coordination. As shown in Table 2, each person involved in the transition of individual children has certain roles and responsibilities that must be fulfilled to ensure smooth transitions.

Coordination for Each Child and Family

The number and scope of transition activities require careful coordination to ensure that required transition events occur within allowable timelines. Each child receiving Part C Early Intervention Services has a service coordinator who is responsible for coordinating transition activities for the child and family and ensuring they take place in a timely manner.

The service coordinator (or other designated person) is responsible for obtaining written parental consent to transmit child-specific information to the public school division in which the child resides no later than April 1 or at least six months prior to the child's third birthday. The service coordinator is also responsible for obtaining parental permission through the use of written prior notice and consent forms to convene a conference among the Part C service provider(s), the family, and the school division at least 90 days prior to the child's eligibility under Part B or 90 days prior to the first day of the school year, whichever comes first. With parental consent, the service coordinator expands the IFSP team to include representatives of the receiving program (as specified in local interagency agreements and policies and procedures). This enables receiving program representatives to provide information and support during the transition process (*Policies and Procedures for the Implementation of Part C of IDEA, 2000*).

Children Transitioning to Part B

Timelines

Due to the many activities that must take place to ensure each child's IEP can be implemented on the first day of school in the fall, it is essential that transition information be conveyed no later than April 1. This date was chosen for transmission of information between Parts C and B service providers to allow public school divisions adequate time to plan for incoming children. This five-month period between the transmission of information and the beginning of school in the fall is needed to convene the required team meetings for each child (eligibility; IEP), conduct evaluations and observations, develop an IEP for each child, plan for and engage personnel, allot classroom space if needed, secure equipment and materials, and arrange transportation for each child.

Table 2: Examples of Roles and Responsibilities in Transition

| <u>EL Service Coordinator</u> | <u>EL Administrator or Council Coordinator</u> | <u>Parents and Family Members</u> | <u>Special Education Administrator</u> | <u>Local Interagency Coordinating Council</u> |
|--|---|---|--|---|
| <ul style="list-style-type: none"> -address transition in initial and subsequent IFSP meetings -help parents identify transition concerns and priorities -provide parents information on options for transition -provide parents with information re: procedural safeguards -secure parental permission prior to exchange of information and records -convene the 90 day transition conference for children potentially eligible for Part B -assist the family in investigating a range of alternative placements if the child is not transitioning to Part B -follow procedures for exchange of records | <ul style="list-style-type: none"> -participate in LICC meetings -ensure agency/staff members are aware of and following interagency agreements for transition -support staff in attending necessary transition meetings for individual children -ensure staff members are knowledgeable of and following transition policies and procedures -plan meeting with Part C and Part B agencies. Share non-identifying information for future planning (staffing needs; classroom needs; transportation) and to coordinate referral process -send identifying information on transitioning children to LEA -ensure proper procedures are followed in exchange of records -ensure procedural safeguards are followed for transition activities -arrange collaborative staff training for local service providers -evaluate transition process | <ul style="list-style-type: none"> -identify transition priorities and concerns at initial IFSP meeting -if priorities and concerns about transition change, convey this to service coordinator -find out about options for child's transition -visit possible programs/services that child might enter/receive -talk to parents of children who have already transitioned -read information about the special education process -attend the transition meeting and, if applicable, child study, eligibility and IEP meetings -maintain a file of all their child's records needed for transition -identify transition priorities, concerns, and plans at initial and subsequent IFSP meetings | <ul style="list-style-type: none"> -participate in LICC meetings -ensure LEA personnel are familiar with and following interagency agreements for transition -ensure procedural safeguards are being followed at each step of special education process -arrange collaborative staff training for local service providers -secure parental permission for exchange of records, initial evaluation, and IEP (placement) -assign eligible children to specific programs or services, arranging transportation as needed -evaluate transition process -plan meeting with Part C and Part B agencies. Share non-identifying information for future planning (staffing needs; classroom needs; transportation) and to coordinate referral process | <ul style="list-style-type: none"> -ensure that functions of local central point of entry are implemented -develop local interagency agreements re: transition -evaluate local interagency transition policies, procedures, and agreements |

Many school divisions do not have full staff available during the summer to conduct evaluations and participate in team meetings; therefore, it is ideal for school divisions to receive initial referrals of children who are potentially eligible for Part B services by April 1 or sooner. Early referrals also are necessary if parents want to observe programs or services prior to the end of the school year and for school division personnel to have opportunities to observe children in their current service delivery settings.

Although April 1 is the target date for transmitting of child-specific information between Parts C and B service providers, in accordance with the *Regulations Governing Special Education Programs for Children with Disabilities in Virginia*, referrals for children who may be eligible for preschool (Part B) services may be made any time during the calendar year. If a child is referred to the Part C system after April 1 and will be age-eligible for Part B services during the following school year, parents are informed of the availability of public school (Part B) services as well as Part C services until the child enters school or reaches the age of three. To ensure that children who are found eligible for Part B can begin receiving services as close to the beginning of the school year as possible, the transmission of information should take place as soon as possible. Families are informed that their child may not receive services from Parts B and C at the same time. (*Policies and Procedures for the Implementation of Part C of IDEA, 2000*)

Transmission of Information

April 1 is the target date for child-specific information (e.g., current IFSP, most recent evaluation findings, and other pertinent records from the EI service provider) is transmitted to the public school division in which the child resides (Figure 1, item 6). This information is transmitted only with written parental consent and will help ensure continuity of services.

The transmission of this information to the school division (special education administrator or designee) constitutes referral, the initial step in the process of determining eligibility for special education and related services (See Table 3, pg 31). For families choosing to delay transition to Part B, school divisions are provided six months advance notice of the date the child will be entering public school services, such date not to occur after the child's third birthday (Policy Pages, July, 2001).

Parents have the right to deny permission for the transmission of child-specific information about their child to the public school division. They may choose to make the referral to the school themselves or they may choose not to notify or refer the child to the school division. Until a referral is made, however, the school division is not obligated to determine if a child is eligible for special education and related services and, therefore, the child cannot receive services. Parents have the right to decline all public school services for their child until the child turns five, which is the age of compulsory school attendance in Virginia.⁴

Transition Conference

With the family's approval, an individual transition planning conference between the family and the LEA is held at least 90 days before the child's third birthday or, the date on which the child is eligible for ECSE under Part B of IDEA (Figure 1, item 7). Each local educational agency will participate in transition planning conferences arranged by the designated local Part C service coordinator (*Regulations Governing Special Education Programs for Children with Disabilities in Virginia*). At the discretion of all persons involved (including parents and representatives from Parts C and B

⁴Although five is the age of compulsory school attendance in Virginia, attendance may be delayed for a year if the parent notifies the local school board that the child is not ready to attend. A child who is six on or before September 30 of the school year must attend school. Options include public schools, private, denominational or parochial schools, and instruction in the home. For further information refer to *Virginia School Entrance Laws, Sec. 22.1* on the Virginia Department of Education website at <http://www.pen.k12.va.us/>.

services), this conference may be held up to six months before the child's third birthday. The purpose of this meeting is to discuss appropriate services the child may receive, to review the child's options for services from the date of eligibility for Part B services through the remainder of the year, and to establish and implement a transition plan (*Policies and Procedures for the Implementation of Part C of IDEA, 2000*). The discussion of appropriate services is intended to be general discussion of potential services that might be appropriate if the child is found eligible for Part B. Identification of specific services is a function of each child's IEP team and will take place later at the IEP meeting if the child is found eligible for Part B services.

Child Study

The transition conference also can serve as a child study meeting, the second step in the special education process (see Table 3, pg 31). The purpose of child study is "to identify and recommend strategies to address the child's learning, behavior, communication, or development" (*Regulations Governing Special Education Programs for Children with Disabilities in Virginia*). A discussion of strategies to address the child's learning, behavior, communication, and development would naturally occur when options for services are discussed during the transition meeting. If the transition conference and child study will take place concurrently, the written notice⁵ sent to parents must include a statement that child study (review of records and other performance evidence) will take place during the meeting. Both Part C and Part B rules must be followed if the Part C transition also serves as Part B child study. Additional representatives must also be invited to the meeting to fulfill the required representation on the child study committee, including the referring source, the principal or designee, at least one teacher, and at least one specialist (*Regulations Governing Special Education Programs for Children with Disabilities in Virginia*). The referring source is likely to be a Part C representative, who will already be in attendance as a member of the transition planning team.

Evaluation

Referral must be made to the public school division's special education administrator or designee who provides all notices and procedural safeguards to parents and secures informed written consent for the evaluation. Each school division ensures that all children who may have disabilities and who may need special education and related services are evaluated. A copy of the procedural safeguards must be made available to the parent or parents upon initial referral for evaluation. Informed parental consent must be obtained before the school division conducts an initial evaluation or re-evaluation. It is important for parents to understand that "*consent for initial evaluation may not be construed as consent for initial placement.*" In giving consent for initial evaluation, a child's parents are not agreeing to any type of special education services. Parental consent for placement is part of the IEP process as discussed below.

During evaluation, a variety of assessment tools and strategies are used to gather functional and developmental information about the child. No single procedure is used as the sole criterion for determining whether a child has a disability. Evaluation data are compiled from a variety of sources including review of existing data, information provided by parents, teachers, and other professionals involved with the child, standardized and non-standardized tests, and observation of the child. If standardized tests are used, they must have been validated for the specific purpose for which they are used and must be administered by trained personnel. Tests also must be administered in the child's

⁵ Procedural safeguards for Part B are similar, but not identical to procedural safeguards for Part C. Part B procedural safeguards include: 1) opportunity to examine records; 2) the right to an independent educational evaluation; 3) prior notice by the LEA; 4) procedural safeguards notice; 5) informed parental consent; 6) rights regarding the use of public or private insurance; and 7) confidentiality of information. See "Definitions" in the Appendix of this document for further explanation (*Regulations Governing Special Education Programs for Children with Disabilities in Virginia*).

native language. For a preschool child, information is collected to enable the child to be involved in and participate in appropriate activities (*Regulations Governing Special Education Programs For Children with Disabilities in Virginia*).

Parents have the right to obtain an independent educational evaluation at public expense if they disagree with an evaluation obtained by the local educational agency, unless the local educational agency initiates a due process hearing to show that its evaluation is appropriate. Each local educational agency must provide parents with an explanation of this process as part of the procedural safeguards notice. If parents initiate an independent educational evaluation, whether or not at public expense, the LEA must consider the results of the evaluation if it meets their criteria, in any decision regarding a free appropriate education for the child (for further requirements for conducting evaluations, see *Regulations Governing Special Education Programs For Children with Disabilities in Virginia*).

Eligibility Determination

The decision regarding eligibility for special education and related services must be made within 65 business days after the referral is received for an initial evaluation. A team composed of parents, personnel representing the disciplines providing evaluations and assessments, an individual qualified to teach children of a specific age, a special education administrator or designee, and others review the information collected during the evaluation process. This team is often referred to as the eligibility team. The child's parent or parents must be given the opportunity to participate in the eligibility meeting and they must be given notice early enough to ensure they can participate if they choose to do so. The notice must include the purpose, date, time, and location of the meeting and who will be in attendance. The parent or the LEA may invite other individuals to the meeting who have knowledge or special expertise regarding the child. Parents of children transitioning from Part C services may want to include the service coordinator and service provider who has unique insight into their children's strengths and needs or can provide documentation of anecdotal or informal evaluation data that have been compiled over a period of time (*Regulations Governing Special Education Programs For Children with Disabilities in Virginia*).

The team must determine if a child is or is not eligible for special education and related services. In addition, the team must determine that, because of the child's developmental delay or disability, the child needs special education and related services in accordance with an IEP. It is important to note that the eligibility team answers only one question: "Does the child have a disability and need special education and related services?" Placement decisions are not made at the eligibility meeting; the IEP team addresses the questions of which specific services or what type of program the child needs and the frequency and intensity of those services.

Children who are age-eligible for Part B services must meet additional eligibility requirements according to the *Regulations Governing Special Education Programs For Children with Disabilities in Virginia*. Children may be found eligible under one of fourteen specific disability categories (see Table 1, pg. 13, for a list of special education categories/disabilities) including the category of developmental delay. Children are not required to be identified by their disability, as long as each child has a disability and, because of it, needs special education and related services (*Regulations Governing Special Education Programs For Children with Disabilities in Virginia*).

Each public school division may determine the level of delay that is significant for eligibility. A preschool child with a developmental delay may qualify for Part B if a significant delay is present in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development. (For further information on eligibility criteria for a specific school division, the parent or service coordinator may contact the local school board office).

IEP Development

Eligible preschool students who receive Part B services must have an Individualized Education Program (IEP). *Regulations Governing Special Education Programs for Children with Disabilities in Virginia* include the following provision:

In the case of a preschool-aged child with a disability, age two (on or before September 30) through age five (on or before September 30), whose parent or parents elect to receive services under Part B of the Individuals with Disabilities Education Act (20 USC Sec. 1400 et. seq.), the local educational agency shall develop an IEP. 34 CFR § 300.347 (c)

Timelines for IEP meeting: If a child is found to be eligible for special education and related services, a meeting must be convened within 30 calendar days of eligibility determination to develop the child's IEP. Procedural safeguards for Part B services specify that, parents must receive written notice of each IEP meeting, along with a copy of the procedural safeguards. The notice shall:

- 1) Include the purpose, date, time, and location of the meeting, and who will be in attendance.*
- 2) Inform the parent or parents of the provisions relating to the participation of other individuals on the IEP team who have knowledge or special expertise about the child.*

(Regulations Governing Special Education Programs For Children with Disabilities in Virginia)

IEP meeting participants: The required participants on a child's IEP team include:

- 1) The parent or parents of the child;*
- 2) At least one regular education teacher of the child (if the child is or may be participating in the regular education environment);*
- 3) At least one special education teacher of the child or, if appropriate, at least one special education provider of the child. For a child whose only disability is speech-language impairment, the special education provider shall be the speech-language pathologist.*
- 4) A representative of the local educational agency who is:*
 - a. Qualified to provide or supervise the provision of specially designed instruction to meet the unique needs of children with disabilities;*
 - b. Knowledgeable about general curriculum; and*
 - c. Knowledgeable about the availability of resources of the local educational agency.*
- 5) An individual who can interpret the instructional implications of evaluation results. This individual may be a member of the team serving in another capacity, other than the parent or the child.*
- 6) At the discretion of the parent, parents, or local educational agency, other individuals who have knowledge or special expertise regarding the child, including related services personnel, as appropriate. The determination of the knowledge or special expertise of any individual shall be made by the party (parent, parents, or local educational agency) who invited the individual to be a member of the IEP team.*
- 7) If appropriate, the child.*
- 8) For children who are in the custody of local social services or other child welfare agency, the child's caseworker pursuant to*

the following conditions:

- a. The caseworker may not assume the role of the parent at the meeting; and*
- b. If the caseworker is unable to attend the meeting as scheduled, the meeting may be held without the caseworker.*

(Regulations Governing Special Education Programs For Children with Disabilities in Virginia)

As already stated, parents of children transitioning from Part C have the right to invite individuals to the IEP meeting who have knowledge or special expertise regarding their children. Parents of a child who is transitioning from Part C may want to invite the service coordinator and the service provider who is familiar with the child's learning styles, preferred activities, and strategies that have or have not been successful in the past.

IEP considerations: In developing each child's IEP, the IEP team considers:

- 1) The strengths of the child, and the concerns of the parent or parents for enhancing the education of their child;*
- 2) The results of the initial and most recent evaluation of the child; and*
- 3) As appropriate, the results of the child's performance on any general state or division-wide assessment programs*

(Regulations Governing Special Education Programs For Children with Disabilities in Virginia)

IEP content: The content of each child's IEP must include:

- 1) A statement of the child's present level of performance, including how the child's disability affects the child's involvement and progress in the general curriculum or, for preschool children, as appropriate, how the disability affects the child's participation in appropriate activities;*
 - a) The statement should be written in objective measurable terms, to the extent possible. Test scores, if appropriate, should be self-explanatory or an explanation should be included.*
 - b) The present level of performance should directly relate to the other components of the IEP.*
- 2) A statement of measurable annual goals, including benchmarks or short-term objectives, related to:*
 - a) Meeting the child's needs that result from the child's disability to enable the child to be involved in and progress in the general curriculum, or, for preschool children, as appropriate, to participate in appropriate activities; and*
 - b) Meeting each of the child's other educational needs that result from the child's disability.*
- 3) A statement of the special education and related services and supplementary aids and services to be provided for the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel that will be provided for the child:*
 - a) To advance appropriately toward attaining the annual goals;*
 - b) To be involved and progress in the general curriculum and*

- to participate in extracurricular and other nonacademic activities; and*
- c) To be educated and participate with other children with disabilities and children without disabilities in the activities described in this section.*
- 4) Information about participation in state and division-wide assessments;*
- 5) The projected dates (month, day, and year) for the beginning of the services and modifications and the anticipated frequency, location and duration of those services and modifications;*
- 6) A statement of:*
 - a) How the child's progress toward the annual goals will be measured;*
 - b) How the child's parent or parents will be regularly informed (through such means as periodic report cards), at least as often as the parent or parents are informed of the progress of their children without disabilities; concerning:*
 - 1) Their child's progress toward the annual goals; and*
 - 2) The extent to which that progress is sufficient to enable the child to achieve the goals by the end of the year.⁶*
- 7) In the case of a preschool-aged child with a disability, age two (on or before September 30) through age five (on or before September 30) whose parent or parents elect to receive services under Part B of the Individuals with Disabilities Education Act (20 USC § 1400 et seq.), the local education agency shall develop an IEP.*

Additional IEP components apply to students age 14 and older.

(Regulations Governing Special Education Programs for Children with Disabilities in Virginia)

Procedural safeguards: Procedural safeguards extend to the IEP process. Written parental consent must be obtained before “*initial provision of special education and related services to a child with a disability and any revision to the child's IEP services.*” Parents are not, however, required to sign the IEP the day it is written. Some parents, especially those who are new to the special education process, may choose to take the IEP document home and review it before signing it. This may be especially helpful if only one parent is able to attend the IEP meeting or if the parents want other family members to read over the document before it is signed. The child may not, however, begin receiving Part B services until the parents have given consent (via their signatures) for the child to receive the services set forth on the IEP.

(Regulations Governing Special Education Programs For Children with Disabilities in Virginia)

Another procedural safeguard states that “*A local educational agency may not use a parent's or parents' refusal to consent to one service or activity to deny the parent, parents, or child any other service benefit, or activity of the local educational agency...*” This means that if parents refuse one or more services on the IEP, their children can still receive other Part B services. *(Regulations Governing Special Education Programs for Children with Disabilities in Virginia)*

⁶ “Year” refers to school year or annual review date as determined by IEP team.

IEP initiation: For children whose IEPs are written in the spring prior to their transition from Part C to Part B services, the IEP would be implemented on the first day of school in the fall. For children who transition at any other point during the school year, the IEP would be implemented as soon as possible. After children transition to the public schools and begin receiving Part B services, they are no longer eligible to receive Part C (EI) services. For children who become 3 during a school year, the IEP would be written for Part B services to begin on their third birthday.

Enrollment in School

The final step in transition to Part B (public school) services is enrollment of the child in school. Any preschool child, who receives services in a public school, even if the child attends only 30 minutes per week, must be enrolled. Each public school division has procedures for enrollment, including documentation of residence within the school division and proof of necessary immunizations. Parents should contact the school their children will attend to learn about the enrollment procedures.

**Table 3: Transition Steps and Timelines for Children Transitioning
from Early Intervention Services (Part C)
to Early Childhood Special Education Services (Part B)**

| Step | Timeline for Children Children Transitioning at Age 2 | Timeline for Children Children Transitioning at Age 3 |
|--|--|---|
| Transition planning is initiated and documented on the Transition Planning page of IFSP. | When child/family enter early intervention services and at all subsequent IFSP meetings. | When child/family enter early intervention services |
| Transition Planning page is reviewed/updated at each IFSP review. | Child/family continue receiving early intervention services. | Child/family continue receiving early intervention services. |
| With parents' permission, identifying information is transmitted to the LEA. (Step 1 in the Special Education Process: Referral) | No later than April 1 (for children transitioning at beginning of the next school year). | No later than April 1 (for children transitioning at beginning of the next school year) or six months prior to child's third birthday. |
| A transition meeting is held among parents, early intervention service providers (including service coordinator), and LEA representatives. (May also serve as Step 2 in the Special Education Process: Child Study Committee meeting) | Within 10 business days of receipt of the referral from Part C | Within 10 business days of receipt of the referral from Part C |
| Child Study Committee determines if child should be referred for evaluation for special education and related services. | Within five business days of Child Study meeting. | Within five business days of Child Study meeting. |
| School division personnel review existing data and, with parental permission, conduct tests and evaluations as needed and determine eligibility for special education and related services. (Steps 3 and 4 in the Special Education Process: Evaluation and Eligibility Determination) | Within 65 business days of referral | Within 65 business days of referral |
| If eligible, the child's Individualized Education Program is written (Step 5 in the Special Education Process: Development of IEP) | Within 30 calendar days of eligibility determination | Within 30 calendar days of eligibility determination |
| Child begins to receive special education and related services specified on IEP. | At beginning of new school year | As soon as possible after IEP is written (if found eligible during current school year) or at beginning of new school year (if found eligible near end of current school year or during summer) |

Children Transitioning to Other Settings

Public school ECSE programs are not an appropriate transition destination for all children receiving EI services. And not all children referred for Part B services will be found eligible for services. The eligibility criteria for Part C differ from those for Part B (see Table 1). If a child is not going to transition to an ECSE program or if he or she is not found eligible for Part B services, the service coordinator assists the family in investigating a range of alternative placements. With parental consent, the service coordinator makes reasonable efforts to convene a conference including the family, service coordinator, and providers of other appropriate services in the community (*Policies and Procedures for Implementation of Part C of IDEA, 2000*). If a two- to three-year old child is not found eligible for Part B services, he or she may continue to receive Part C services until his or her third birthday, at which time another transition option would be implemented.

Steps for children transitioning to programs or services other than the public schools (i.e., public child care, Head Start, public or private preschool) vary according to the locality and the program or service the child is entering. As part of the IFSP transition planning activities, a meeting should be scheduled with the family, service coordinator, and a representative from the new program to outline how and when the transition is going to be made and share information about the child and family that will promote success in the new environment (Figure 1, item 7).

Children Moving to Different Localities

Children with IFSPs Who Move Within Virginia

If a child with a current IFSP moves within the state, services can be resumed in the new locality. Each local interagency coordinating council (LICC) has a list of all other councils in the state as well as the central point of entry for each locality. The child and family's current service coordinator should use this information to refer the family to the central point of entry in the new locality. This information also can be accessed through the Central Directory (Central Point of Entry) by calling 1-800-234-1448. A link to the central point of entry directory can be found on the following Web site: <http://www.infantva.org>.

Communication and coordination should occur between the current service coordinator and the new service coordinator in advance of the move to enable services to be in place in the new location based on the current IFSP. The new service coordinator will schedule an IFSP review soon after the family moves in order for the new team to review the existing IFSP to make necessary modifications. Section V of the IFSP (Services Needed to Achieve Early Intervention Outcomes) will need to be revised to reflect the agencies and individuals who will provide each service in the new locality.

Children with IFSPs Who Move Out-of-State

In other states, children continue to receive EI services until age 3, at which time they transition into ECSE programs or other services or programs in their communities. A child with a current IFSP who moves out of Virginia may be eligible for EI services in his or her new residence. To initiate the process of transition from Virginia, the current service coordinator should refer the family to the Part C Coordinator or central point of entry in the new state. Because the lead agency for Part C varies among states, a different agency (e.g., Health, Education, Human Services, Rehabilitation Services, Social Services, Developmental Services, Family Services, Public Welfare) may be responsible for ensuring provision of services to infants and toddlers in the family's new state of residence. Part C coordinators and lead agencies for each state can be accessed through the National Early Childhood Technical Assistance Center (NECTAC) website (<http://www.nectac.org/contact/ptccoord.asp>)

Two- to Three-Year Old Children with IEPs Who Move Out-of-State

The Code of Virginia provides for public school services for two-year-old children with a disability. It is likely that two- to three-year old children with IEPs who move from Virginia to another state will receive services through the IFSP process in their new state. If they can continue to receive services with an IEP, the parents should contact the special education director (or designee) in the new school division and inform him or her that their child has a current IEP. They would then be informed of the steps needed for their child to begin receiving services. If two- to three-year old children cannot receive services with an IEP in the new state, parents should be referred to the central point of entry for Part C services in the new state. If the child is eligible for early intervention services in the new state, a new IFSP would be developed.

Children Who Move to Virginia

When a child and family arrive in Virginia with a completed IFSP from another state, a (temporary) service coordinator is assigned to help to determine whether the child meets Virginia's definition of eligibility. This child becoming known to Virginia's Part C system is a new referral to the local Part C system; thus, the development of the Virginia IFSP must be completed within 45 calendar days. In most cases, if the child's early intervention record is available, it will not be necessary to complete any new evaluations or assessments to determine eligibility. Virginia's policies and procedures related to evaluation and assessment state that:

"...with the permission of the parent(s), any evaluation data less than six months old must be reviewed to determine if they are appropriate for inclusion in determining eligibility in order to prevent children and families from undergoing unnecessary evaluation and duplication of already existing evaluation information. However, given the rapid changes in growth and development in infancy, evaluation teams need to ensure that all information used to determine eligibility accurately reflects a child's current status."

(Policies and Procedures for Implementation of Part C of IDEA, 2000).

Children for whom there is documentation of eligibility in another state based upon a diagnosed physical or mental condition that has a high probability of resulting in a developmental delay listed in Virginia's definition of eligibility would not require any additional evaluations to determine that they are also eligible under Virginia's Part C definition.

After eligibility under Virginia's definition is determined, the team proceeds with development of a Virginia IFSP. If a child and family are not found eligible for Part C services in accordance with Virginia's policies and procedures, a referral should be made to other appropriate services in the community (*Policies and Procedures for Implementation of Part C of IDEA, 2000*).

When a child with a current IEP moves to Virginia from another state, the school division must decide whether it will adopt the most recent evaluation and IEP developed by the local educational agency in the other state. If the Virginia school division determines that the existing IEP meets the requirements of IDEA and state regulations and is appropriate for the child, the school division will notify the parent and, with parental consent, implement that IEP. If the parents and school division are not satisfied with the IEP developed in the previous state or a revision to the IEP is indicated for other reasons, an IEP meeting should be conducted without undue delay, in no case later than 30 calendar days after the date the school division determines that it will accept the evaluation and eligibility determination from the previous state. The most recent IEP must be implemented until the new IEP is developed and agreed upon (*Regulations Governing Special Education Programs For Children with Disabilities in Virginia*).

If the school division does not adopt the previous state's evaluation or does not receive a copy of the evaluation, the school division provides proper notice to the parents, initiates evaluation procedures, and conducts an evaluation. When the evaluation is completed and eligibility has been determined, an IEP meeting to develop an appropriate IEP for the child is held without undue delay, in no case later than 30 calendar days after the date the child is determined to be eligible. During the time the evaluation is being conducted, the child receives services in accordance with the existing IEP, excluding any sections of the IEP that are not in accordance with IDEA and state regulations. The LEA must inform the parents of the sections of the existing IEP that are not being provided. If the child's parents disagree with the LEA's evaluation or proposed IEP, they may initiate a due process hearing. (*Regulations Governing Special Education Programs For Children with Disabilities in Virginia*)

INTERAGENCY AGREEMENTS

Two state-level interagency agreements are in effect to support transition of children and families from Part C to Part B services. The first is a memorandum of agreement addressing transition as one part of a comprehensive agreement among state agencies involved in the implementation of Part H of the Individuals with Disabilities Education Act (now Part C of IDEA).⁷ The agreement was signed in September 1996 to continue the full implementation of a statewide, community-based, interagency system of early intervention services for all eligible children and their families. While the state interagency agreement identifies some responsibilities for particular agencies, such as assigning joint responsibility for child find to DMHMRSAS and the Department of Education, it primarily identifies services that each agency may provide through its local counterparts. In light of what each of the participating state agencies has agreed may be provided by their agency and local counterparts, each of the forty LICCs has facilitated the development of local interagency agreements that identify the responsibilities of local public and private agencies in that community. Some local agencies and providers may have their responsibilities outlined in a contract rather than in an interagency agreement or memorandum of understanding. That 1996 Agreement may be found as an appendix to *the Policies and Procedures for the Implementation of Part C of IDEA, 2000*.

The second interagency agreement was signed in December 1999 by three entities: the US Department of Health and Human Services, the Administration for Children and Families Head Start Bureau - Region III and the Migrant Branch; the Virginia Department of Education; and the Virginia Department of Mental Health, Mental Retardation, and Substance Abuse Services.⁸ This agreement addresses transition as part of a comprehensive agreement among the agencies for service delivery for children with disabilities and their families. Recommended practices for transition are as follows:

- ✓ *Provide training for staff from Part C, Part B, Early Head Start, and Head Start programs in transition planning, implementation, and evaluation of the transition process.*
- ✓ *Develop joint transition plans among Early Head Start, Head Start, Part C, and Part B programs, and from Head Start and Part B to school age programs.*
- ✓ *Inform parents of the differences among systems in role, staffing patterns, costs or fees, schedules, and services.*
- ✓ *Share staff members across systems in order to facilitate a smooth transition.*
- ✓ *Provide early and mutually planned transfer of records with parent consent at times convenient for both systems.*

(Interagency Agreement for Service Delivery for Children with Disabilities and Their Families Between U.S. Department of Health and Human Services, The Administration for Children and Families Head Start Bureau - Region III and the Migrant Branch and The Virginia Department of Education and The Virginia Department of Mental Health/Mental Retardation/Substance Abuse Services, December, 1999).

The responsibilities of the Virginia Department of Education, public school divisions, and the Virginia

⁷ At the time the agreement was signed (September, 1996) the section of IDEA legislation addressing infants and toddlers was designated Part H. Since then, it has been changed to Part C.

⁸ A complete copy of this agreement is included in Appendix Y of Commonwealth of Virginia 2000 Policies and Procedures for the Implementation of Part C of the Individuals with Disabilities Education Act (IDEA).

Department of Mental Health, Mental Retardation, and Substance Abuse Services for ensuring smooth transition of children and families from Part C services to Part B and other services have been discussed in detail earlier in this document. As set forth in the interagency agreement, the responsibilities of Head Start (i.e., local Early Head Start and Head Start grantees) are as follows:

- ✓ *Address strategies for the transition of children into Head Start from infant/toddler programs (services) (0-3 years), as well as the transition from Head Start into the next placement. [45-CFR 1308.4(g)]*
- ✓ *Participate in and support efforts for a smooth and effective transition for children who, at age three, will need to be considered for services for preschool age children with disabilities. [45-CFR 1304.20(f)(2) iii]*
- ✓ *Support parents of children with disabilities entering from infant/toddler programs (services). [45-CFR 1308.21(a)(1)]*
- ✓ *Include in the Head Start IEP information on Head Start transition services. [45-CFR 1308.19(e)(4)]*
- ✓ *Assist parents in the transition of children from Head Start to public school or other placement, beginning early in the program year, [45-CFR 1308.21(b)]*
- ✓ *In cooperation with the child's parents, notify the school of the child's planned enrollment prior to the date of enrollment. [45-CFR 1308.21(c)]*

(Interagency Agreement for Service Delivery for Children with Disabilities and Their Families Between U.S. Department of Health and Human Services, The Administration for Children and Families Head Start Bureau - Region III and the Migrant Branch and The Virginia Department of Education and The Virginia Department of Mental Health/Mental Retardation/Substance Abuse Services, December, 1999).

The agreement also delineates recommended practices to enhance the implementation of transition at the local level. They are as follows:

- ✓ *Provide training for staff from Part C, Part B, Early Head Start, and Head Start programs in transition planning, implementation, and evaluation of the transition process.*
- ✓ *Develop joint transition plans among Early Head Start, Head Start, Part C, and Part B programs, and from Head Start and Part B to school age programs.*
- ✓ *Share staff members across systems in order to facilitate a smooth transition.*
- ✓ *Provide early and mutually planned transfer of records with parent consent at times convenient for both systems.*

(Interagency Agreement for Service Delivery for Children with Disabilities and Their Families Between U.S. Department of Health and Human Services, The Administration for Children and Families Head Start Bureau - Region III and the Migrant Branch and The Virginia Department of Education and The Virginia Department of Mental Health/Mental Retardation/Substance Abuse Services, December, 1999).

In addition to state-level interagency agreements, each Local Interagency Coordinating Council must have interagency agreement(s). *Policies and Procedures for Part C of IDEA- 2000*, state that such agreements must “*delineate each agency's and/or provider's responsibilities related to compliance with federal, State, and local regulations and policies and procedures; compliance with all Part C assurances, provisions of systems components (e.g., public awareness, data collection, etc.);*

and provision of direct services. Local Head Start programs are required to have interagency agreements with local school systems. State-level interagency agreements provide the framework for local agreements to follow. Some local agencies and providers may outline their responsibilities in a contract rather than in an interagency agreement or memorandum of understanding.

TRANSITION QUESTIONS AND ANSWERS

1. For the purposes of transition, when is a child considered to be age two?

A child is considered to be age two on the child's birthday. If a child is transitioning to Part B at age two, her birthday must occur on or before September 30. If a two-year-old child continues to receive Part C services, she is no longer eligible for Part C services on her third birthday.

2. Can a child be enrolled in both Part C and Part B services at the same time? If a child will be entering a Part B program at the beginning of the school year in the fall, can he continue to participate in Part C for the summer prior to that school year?

A child cannot receive Parts C and B services at the same time. The dates of eligibility/enrollment for Parts B and C services cannot overlap. If a child is transitioning from Part C to Part B at the beginning of the school year in the fall, his IEP may be written in the spring but the date for initiation of services would not be until August or September, for the first day of the school year. He may continue to receive Part C services as per his IFSP over the summer months but not after the date on which he begins to receive Part B services.

3. What happens if a two-year-old child with a current IFSP moves to Virginia from another state? And, what happens if a child's IFSP from another state is based on at-risk criteria?

The child and family would either contact the central point of entry for early intervention services in their new locality or the public school division in their new locality. If the family chooses for their child to continue to receive Part C services and the child meets eligibility criteria in Virginia, an IFSP is developed. If the IFSP from their former state of residence is based on at-risk criteria, the child may not be eligible for Part C services. In this case, the family would be referred to other available services in the community. If the family chooses for their child to receive Part B services, they would contact the public school division and be advised of the referral/eligibility process. The child could not begin receiving Part B services until he is found eligible and an IEP is written.

4. May public schools decide to accept transitioning children only at certain times (e.g., September) or must they accept children throughout the school year? If two-year-old children transition after the beginning of school in the fall, what can public school divisions do to accommodate unexpected increases in caseloads?

Public schools must accept referrals for age-eligible children who are potentially in need of special education and related services at any time during the calendar year. This applies to preschool children who are two years old on or before September 30. If age eligible two-year-old children transition after the beginning of school in the fall, public schools must do whatever is necessary to recruit personnel to provide the services specified on the IEP. If large numbers of two-year-olds are transitioning after school begins in the fall, this may be an indication that local transition policy and procedures, specifically timelines for making referrals, need to be clarified through the LICC. Public awareness/child find activities should be strengthened and evaluation efforts for eligibility for both Parts B and C better coordinated to avoid duplication. For children who are two years old after September 30, the school division does not begin services until the following school year.

5. May a child and family leave Part C and later re-enter if for some reason they change their minds?

If a child is age-eligible for Part C services, the family may contact the local point of entry and refer their child to determine eligibility for early intervention services. Since the child exited Part C services, however, she no longer would have a current IFSP. If she were once again referred and found eligible for Part C services, a new IFSP would need to be developed before services could be implemented.

6. If a child has transitioned from Part C to Part B at age two and will not turn three until September, may he return to Part C services for the summer?

In theory, it may be possible for the child to return to Part C services but in practice it is unlikely to happen. The child would have to exit Part B services through the eligibility process and then be considered as a new referral for EI services. The EI service coordinator has 45 days from the time of referral to the local central point of entry in which to develop an IFSP; therefore, it would probably take most of the summer before a new IFSP could be written and services implemented. To return to Part B services the child must again go through the evaluation/eligibility/IEP process. A more logical approach would be for the child's IEP team to consider his eligibility for extended school year whereby Part B services are extended over the summer to eligible children.

7. If a child turns three mid-way through the school year, may she remain in Part C services or must she transition to a public school (Part B) or other program in the community?

Children are age-eligible for Part C services through age two; thus, a child is no longer eligible for Part C services the

day she turns three and must transition to Part B or other appropriate services in the community.

8. How does transition differ if a two- or three-year-old child is entering a Part B program from a program other than a Part C program, such as Head Start or a private preschool?

The transition process would basically be the same. A referral would be made to the public school division by the parent or Head Start or preschool program director (with parents' permission) and the timelines for eligibility determination would begin. The Part C policy requirement for a transition meeting to be held 90 days prior to the child's birthday or projected date of transition would not apply.

9. When a child moves from Part C to Part B, will he continue to receive therapy (speech-language, physical, occupational) with the same intensity and frequency as in an early intervention program?

Only each child's IEP team can answer this question. The IEP team first determines the child's needs and then decides the type and extent of services, which will meet the child's needs. A child's needs may change over time so the intensity and frequency of services provided to meet EI outcomes may no longer be appropriate to meet the IEP goals and objectives.

10. Must a child be determined eligible categorically (i.e., with a category label) when entering Part B?

Although a local school division is not required to identify children by disability category a child must meet the eligibility criteria for services under one or more of fourteen disability categories in order to receive services. Preschool children may be found eligible under the category of developmental delay. School divisions are, however, required to report children by category for state and federal funding.

11. Can children who meet eligibility for Early Head Start or Head Start and either Part B or Part C be enrolled in both programs simultaneously?

Children can be enrolled in Early Head Start or Head Start and receive either Part C or Part B services at the same time. Head Start programs provide appropriate settings for integrated/collaborative services for preschool children.

12. What happens when a family desires a service for their child that is not covered by Part C or by the Part B mandate?

Parts C and B provide entitled services that are covered by their respective mandates and determined by IFSP and IEP teams. If a family decides their child needs a service that is not provided by Parts C or B, they may seek and pay for such services independently.

13. Is it possible for a child who is receiving Part C services to be found ineligible for Part B services at age 2? What will be done for those children not eligible for Part B services?

Because eligibility criteria for Parts C and B differ in Virginia, it is possible that a child transitioning from Part C may not be found eligible for Part B services. In such cases, service coordinators and public school personnel will provide information to the family about other appropriate services in the community and the child may also continue to receive Part C services through age two.

14. Can EI evaluation and assessment results be used for determining ECSE eligibility?

A school division must consider all information available and may use evaluation and assessment results from another individual or agency if the administration of the tests meets their criteria. An important consideration in the use of prior evaluation and assessment results is how long ago the tests were administered and whether the child has made measurable strides in development since the tests were administered.

15. What happens if parents elect not to transition their child to early childhood special education even though the child has been found eligible?

Parents have the right to decline special education and related services for their child. Transition may be delayed until some future date. If the child is still age-eligible for Part C, he may continue to receive those services until his third birthday. Parents who decline services must be advised that referring their child back to the public schools is an ongoing option. Documentation of the decision to decline services, including parent's signature, is required.

16. What happens if a child turns three and eligibility for Part B services or the content of the IEP is in dispute?

When a child turns three, early intervention services end. If an IEP team has determined that a child is not eligible for Part B or the content of the IEP cannot be agreed upon, the parent(s) may request mediation, a due process hearing, or both. The child may not remain in early intervention services while the dispute is being resolved because she is no longer age-eligible for Part C services. A child may not begin receiving Part B services without a current IEP.

17. Who is responsible for arranging the Transition Conference and which procedural safeguards apply?

Local interagency coordinating councils are responsible through interagency agreements and local policies and procedures for identifying who will be responsible for carrying out transition conferences. The 90-day transition conference is the responsibility of the Part C service coordinator and, therefore, the meeting is conducted using Part C procedural safeguards. If, however, the meeting also serves as child study and the child will be referred for evaluation, the school division should provide parents with a copy of their (Part B) procedural safeguards as well.

18. How can an IEP team determine whether a child is eligible for Extended School Year (ESY) services when the initial IEP is developed?

The IEP team must consider a number of factors including whether annual goals are related to critical life skills, whether there is a likelihood of substantial regression of these skills caused by a normal school break and a failure to recover those lost skills in a reasonable time. The IEP team must decide that failure to provide ESY will prevent the child from receiving some benefit from the educational program to be provided during the regular school year. It can be difficult to make this determination if the child has received year-round early intervention services prior to his transition to the public school. Any data available on the child's level of maintenance of critical life skills during any periods when EI services have not been received can be helpful in making this decision. The topic can be revisited at any time throughout the school year through the IEP.

19. Are Part C services extended to children who are at-risk for developmental delay or disability?

The current definition of eligibility for Part C services in Virginia does not include infants and toddlers who are at-risk for developmental delay or disability.

20. Who can sign an IFSP or IEP when a child is in foster care and/or a ward of the state?

If parental rights have been terminated and the child is in the custody of the local department of social services, then a surrogate parent must be appointed. The foster parent may be considered for appointment as the surrogate parent, as well as a relative or other qualified person.

The Lead Agency (Part C) or local education agency (Part B) ensures that surrogate parents are selected in accordance with Virginia Law and that the person appointed as a surrogate parent:

- a) *Has no interest that conflicts with the interest of the child;*
- b) *Has knowledge and skills that ensure adequate representation of the child;* [For Part B, the prospective surrogate parent must complete local educational agency approved training provided annually to ensure that surrogate parents possess knowledge of special education and related services as well as knowledge of the legal requirements necessary to represent the children.]
- c) *Is not an employee of the State Lead Agency or other State agency (For Part C) or Virginia Department of Education or any other agency which is involved in the education or care of the child (for Part B);*
- d) *Is an adult; and*
- e) *Resides in the same general geographic area as the child, whenever possible.*

(34 CFR §300.515(e))

A foster parent may act as a parent under Parts C and B if:

- a) *The natural parents' authority to make the decisions required of parents under the Act has been extinguished under State law; and*
- b) *The foster parent-*
 - i) *Has an ongoing, long-term parental relationship with the child;*
 - ii) *Is willing to make the decisions required of parents under the Act;*
 - iii) *Has no interest that would conflict with the interest of the child.*

(34 CFR §303.19(b))

The term "parent or parents" does not include local or state agencies or their agents, including local departments of social services (DSS); therefore, there are no circumstances under which the DSS social worker would sign an IFSP or IEP as the parent. A DSS representative may sign for medical purposes (e.g., for release of medical records).

(COV §22.1-1; 34 CFR §300.20)

References

A Memorandum of Agreement Among the Agencies Involved in the Implementation of Part H of the Individuals with Disabilities Education Act (IDEA) to Meet Full Implementation Requirements, September 1996.

Interagency Agreement for Service Delivery for Children with Disabilities and Their Families Between U.S. Department of Health and Human Services, The Administration for Children and Families Head Start Bureau - Region III and the Migrant Branch and The Virginia Department of Education and The Virginia Department of Mental Health/Mental Retardation/Substance Abuse Services, December, 1999.

Policies and Procedures for Implementation of Part C of IDEA, 2000.

Regulations Governing Special Education Programs for Children with Disabilities in Virginia (March 27, 2002).

The Policy Pages, July 2001.

Appendices

DEFINITIONS

at no cost (Part B) - Means that all specially designed instruction is provided without charge, but does not preclude incidental fees that are normally charged to students without disabilities or their parent or parents as part of the regular education program.

(34 CFR § 300.26(b)(1))

assessment (Part C) - The ongoing procedures used by appropriately qualified personnel throughout the period of the child's eligibility under [Part C] to identify:

1. The child's unique strengths and needs and the services appropriate to meet those needs; and
2. The resources, priorities, and concerns of the family and the supports and services necessary to enhance the family's capacity to meet the developmental needs of their infant or toddler with a disability.

(34 CFR § 303.322(b)(2))

at-risk - Children from birth through age two who are at risk of having substantial developmental delays.

child study committee - a committee that enables school personnel, and nonschool personnel, as appropriate, to meet the needs of individual children who are having difficulty in the educational setting. The committee reviews existing data to make recommendations to meet children's needs and reviews the results of implementation of the recommendations. The committee may or may not refer the child for evaluation for special education and related services.

(Regulations Governing Special Education Programs for Children With Disabilities in Virginia, 2001)

child with a disability – a child evaluated, and determined, as a result of the evaluation, to have autism, deaf-blindness, a developmental delay, a hearing impairment including deafness, mental retardation, multiple disabilities, an orthopedic impairment, other health impairment, an emotional disturbance, a severe disability, a specific learning disability, a speech or language impairment, a traumatic brain injury, or a visual impairment including blindness, who by reason thereof, needs special education and related services.

(COV § 22-1-213; 34 CFR § 300.7)

developmental delay (Part C) -

1. Children who are functioning at least 25% below chronological or adjusted age in one or more of the following areas:
 - a. cognitive development;
 - b. physical development (including fine motor, gross motor, vision, and hearing);
 - c. communication development;
 - d. social or emotional development;
 - e. adaptive development.

(34 CFR § 303.16(a)(1))

OR-

2. Children who manifest atypical development or behavior, which is demonstrated by one or more of the following criteria (even when evaluation does not document a 25% development delay):
 - a. Abnormal or questionable sensory-motor responses, such as:
 - abnormal muscle tone;
 - limitations in joint range of motion;
 - abnormal reflex or postural reactions;
 - poor quality of movement patterns or quality of skill performance;
 - oral-motor skills dysfunction, including feeding difficulties;
 - b. Identified affective disorders, such as:
 - delay or abnormality in achieving expected emotional milestones;
 - persistent failure to initiate or respond to most social interactions;
 - fearfulness or other distress that does not respond to comforting by caregivers;
 - c. Behavior disorders that interfere with the acquisition of developmental skills.

(34 CFR § 303.16(a)(2))

developmental delay (Part B) - a disability affecting a child ages two through eight:

Who is experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures, in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and By reason thereof, needs special education and

related services.

(34 CFR § 300.7 (b); § 300.313)

due process hearing (Part B)- an administrative procedure conducted by an impartial hearing officer to resolve disagreements regarding the identification, evaluation, educational placement and services, and the provision of a free appropriate public education that arise between a parent or parents and a local educational agency. A due process hearing involves the appointment of an impartial hearing officer who conducts the hearing, reviews evidence and determines what is educationally appropriate for the child with a disability.

(34 CFR § 300.507(a))

early identification and assessment of disabilities - the implementation of a formal plan for identifying a disability as early as possible in a child's life.

(34 CFR § 300.24(b)(3))

early intervention program - The total effort in Virginia that is directed at meeting the needs of children eligible under Part C and their families.

(34 CFR § 303.11)

early intervention services (Part C) - Services that:

1. Are designed to meet the developmental needs of each child eligible under [Part C] and the needs of the family related to enhancing the child's development;
2. Are selected in collaboration with the parent(s);
3. Are provided:
 - a) Under public supervision;
 - b) By "qualified personnel" as defined in §303.31;
 - c) In conformity with an individualized family service plan;
 - d) At no cost, unless, subject to §303.520(b)(3), Federal or Virginia law provides for a system of payment by families, including a schedule of sliding fees; and
4. Meet the standards of Virginia including the requirements of Part C.

(34 CFR §303.12(a))

Early intervention services include: assistive technology devices and assistive technology services; audiology; family training, counseling, and home visits (services provided by social workers, psychologists and other qualified personnel); health services; medical services only for diagnostic or evaluative purposes; nursing services; nutrition services; occupational therapy; physical therapy; psychological services; service coordination services; social work services; special instruction; speech-language pathology; transportation and related costs; and vision services. Note: This list of services is not exhaustive. Early intervention services may include such services as the provision of respite and other family support services.

(34 CFR §303.12 NOTE)

evaluation - The procedures used by appropriate qualified personnel to determine a child's initial and continuing eligibility under [Part C], consistent with the definition of "infants and toddlers with disabilities" in §303.16, including determining the status of the child in each of the developmental areas or the procedures used to determine whether a child has a disability and the nature and extent of the special education and related services that the child needs under Part B.

(34 CFR §303.322(b)(1))

extended school year services - special education and related services that are provided to a child with a disability beyond the normal school year of the local educational agency, in accordance with the child's IEP; at no cost to the parent or parents of the child. Such services must meet the standards of the Virginia Department of Education.

(34 CFR §300.309(b))

family - Each family is defined according to each family's definition of itself, for early intervention services.

impartial procedures for resolution of disagreements (Part C) - impartial procedures assured by the Lead Agency that are followed for the timely administrative resolution of parent/provider disagreements (individual child complaints).

(Note: See Component X of the *Policies and Procedures for Part C of IDEA* for further information on impartial procedures.)

individualized education program (IEP) - a written statement for a child with a disability that is developed, reviewed, and revised in a team meeting in accordance with Part B. The IEP specifies the individual educational needs of the child and what special education and related service are necessary to meet the needs.

(34 CFR §300.340(a))

individualized family service plan (IFSP) - a written plan for providing early intervention:

1. Is developed jointly by the family and appropriate qualified personnel providing early intervention services;
2. Is based on the multidisciplinary evaluation and assessment of the child and the assessment of the strengths and needs of the child's family, as determined by the family and required in 34 CFR 303.322; and
3. Includes services necessary to enhance the development of the child and the capacity of the family to meet the special needs of the child and other components listed under 34 FR 303.344.

(34 CFR §303.340(b)(1-3))

informed parental consent - occurs when:

1. The parent or parents or eligible student [if appropriate] has been fully informed of all information relevant to the activity for which consent is sought in the parent's, parents', or student's [if appropriate] native language, or other mode of communication;
2. The parent or parents or eligible student [if appropriate] understands and agrees, in writing, to the carrying out of the activity for which consent is sought, and the consent describes that activity and lists the records (if any) that will be released and to whom; and
3. The parent or parents or eligible student [if appropriate] understands that the granting of consent is voluntary on the part of the parent or parents or eligible student and may be revoked at any time.

(34 CFR §303.401(a))

lead agency - The Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS) serves as the lead agency for Part C in Virginia.

least restrictive environment (LRE) - to the maximum extent appropriate, children with disabilities, including children in public and private institutions or other care facilities, are educated with children who are not disabled, and that special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.

(34 CFR §300.550 et. seq.)

local educational agency (LEA) - a local school division governed by a local school board, a state-operated program that is funded and administered by the Commonwealth of Virginia, or the Virginia School for the Deaf and Blind at Staunton and the Virginia School for the Deaf, Blind and Multi-Disabled at Hampton.

(Regulations Governing Special Education Programs for Children With Disabilities in Virginia, 2001)

local participating agency/provider - any public agency or its contract agency/provider providing early intervention services or other activities according to Part C policies and procedures to Part C eligible children and their families, or another public/private agency/provider who so agrees by interagency agreement or memorandum of understanding.

(Policies and Procedures for the Implementation of Part C of IDEA, 2000)

medical services (Part C) - Services provided by a licensed physician to determine a child's developmental status and need for early intervention services [for diagnostic or evaluation purposes only].

(34 CFR §303.12(d)(5))

medical services (Part B) - services provided by a licensed physician or nurse practitioner to determine a child's medically related disability that results in the child's need for special education and related services.

(Regulations Governing Special Education Programs for Children With Disabilities in Virginia, 2001)

natural environments - settings that are natural or normal for an infant or toddler's age peers who have no disability.

notice - written statements in English or in the primary language of the home of the parent or parents, or, if the language or other mode of communication of the parent or parents is not a written language, oral communication in the primary language of the home of the parent or parents. If an individual is deaf or blind, or has no written language, the mode of communication would be that normally used by the individual (such as sign language, Braille, or oral communication).

(34 CFR §300.503(c))

occupational therapy services (Part C) - services to address the functional needs of a child related to adaptive development, adaptive behavior and play, and sensory, motor, and postural development. These services are designed to improve the child's functional ability to perform tasks in home, school, and community settings, and include:

1. Identification, assessment, and intervention;
2. Adaptation of the environment, and selection, design, and fabrication of assistive and orthotic devices to facilitate development and promote the acquisition of functional skills; and
3. Prevention or minimization of the impact of initial or future impairment, delay in development, or loss of functional ability.

(34 CFR §303.12(d)(8))

occupational therapy services (Part B) - services provided by a qualified occupational therapist or services provided under the direction or supervision of a qualified occupational therapist and includes:

1. Improving, developing, or restoring functions impaired or lost through illness, injury, or deprivation;
2. Improving ability to perform tasks for independent functioning if functions are impaired or lost; and
3. Preventing, through early intervention, initial or further impairment or loss of function.

(Regulations for the Licensure of Occupational Therapists (18 VAC 85-80-10 et seq.); 34 CFR § 300.24(b)(5))

paraprofessional - an appropriately trained employee who assists and is supervised by qualified professional staff in the provision of Part B services. For Part C services, paraprofessionals are early intervention assistants, physical therapy assistants, and occupational therapy assistants.

parent or parents - A natural or adoptive parent or parents of a child, a guardian, a person acting in the place of a parent (such as a grandparent or stepparent with whom the child lives, or a person who is legally responsible for the child's welfare), a foster parent, or a surrogate parent.

participating State agencies - The State agencies identified in the Code of Virginia that are responsible for ensuring the implementation of a comprehensive system for early intervention services.

physical therapy services (Part C) - includes services to address the promotion of sensorimotor function through enhancement of musculoskeletal status, neurobehavioral organization, perceptual and motor development, cardiopulmonary status, and effective environmental adaptation. These services include:
Screening, evaluation, and assessment of infants and toddlers to identify movement dysfunction;
Obtaining, interpreting, and integrating information appropriate to program planning to prevent, alleviate, or compensate for movement dysfunction and related functional problems; and
Providing individual and group services or treatment to prevent, alleviate, or compensate for movement dysfunction and related functional problems.

(34 CFR § 303.12(d)(9))

physical therapy services (Part B) - services provided by a qualified physical therapist or under the direction or supervision of a qualified physical therapist upon medical referral and direction.

(Regulations for Licensure of Physical Therapy (18VAC 85-80-10 et seq.); 34 CFR § 300.24 (b)(2))

point of entry – The place where families and primary referral sources make initial contact with the local Part C system.

procedural safeguards (Part C) - rights, which underlie the Part C process in Virginia, including:

1. The right to a timely, multidisciplinary evaluation and assessment;
2. The right, if eligible under Part C, to appropriate early intervention services for their child and family;
3. The right to refuse evaluations, assessments, and services;
4. The right to receive written prior notice provided in the parents' native language (unless clearly not feasible to do so) before a change is made or refused in the identification, evaluation, or placement of the child, or in the provision of appropriate early intervention services to the child or family;
5. The right to maintenance of the confidentiality of personally identifiable information;
6. The right to inspect, review and, if appropriate, correct records relating to screening, evaluations and assessments, eligibility determination, the development and implementation of the IFSP, individual complaints dealing with the child, and any other portion of the Part C program involving records about the child and the child's family;
7. The right to be invited to, and to attend and participate in, all meetings in which a decision is expected to be made regarding a proposal to change the identification, evaluation, or placement of the child, or the provision of appropriate early intervention services to the child or family;

8. The right to timely administrative resolution of complaints;
9. The right to use mediation to resolve complaints;
10. The right to use administrative and judicial processes to resolve family-provider disagreements, individual complaints dealing with the child, and other areas under Part C involving records about the child and the child's family; and
11. The right to receive services in the child's natural environment unless early intervention cannot be achieved satisfactorily in the natural environment.

(Policies and Procedures for Part C of IDEA, 2000)

(Note: See Component X of the Policies and Procedures for further information on procedural safeguards.)

procedural safeguards (Part B) - rights extended to parents of children receiving special education and related services, beginning at the point of initial referral for evaluation. These rights include:

1. Opportunity to inspect and review all records with respect to the identification, evaluation, and educational placement of their child and the provision of a free, appropriate, public education to the child;
2. Notice to ensure that the parent(s) have the opportunity to participate in meetings regarding their child;
3. Involvement in placement decisions as members of their child's IEP team or any Comprehensive Services Act team;
4. An independent educational evaluation of their child at public expense if they disagree with an evaluation obtained by the local educational agency;
5. Consideration by the local educational agency of results of parent-initiated independent educational evaluations;
6. Written notice, in language understandable to the general public and in the native language of the parent(s) or other mode of communication, before the local educational agency proposes to initiate or change the identification, evaluation or educational placement of the child, or the provision of a free appropriate public education (FAPE) or refuses to initiate or change the identification, evaluation, or educational placement of the child, or the provision of FAPE for the child;
7. Procedural safeguards notice upon initial referral for evaluation; each notification of an IEP meeting; reevaluation of the child; receipt of a request for a due process hearing; notification of a decision to take disciplinary action;
8. Informed parental consent before an initial evaluation or reevaluation; any change in the identification of a child with a disability; initial provision of special education and related services to a child or any change in the IEP; partial or complete termination of special education and related services; or accessing a parent(s)' private insurance proceeds;
9. Notice and consent regarding use of public or private insurance;
10. Confidentiality of information and access rights to any education records relating to their child that are collected maintained, or used by the local educational agency and request for amendment of records.

(Note: This summary definition of procedural safeguards has been condensed from the regulatory definition in *Regulations Governing Special Education Programs for Children with Disabilities in Virginia*.)

psychological services (Part C) - services provided by a qualified psychologist or under the direction or supervision of a qualified psychologist, including:

1. Administering psychological and educational tests and other procedures;
2. Interpreting assessment results;
3. Obtaining, integrating, and interpreting information about child behavior and conditions relating to learning;
4. Consulting with other staff members in planning school programs to meet the special needs of children as indicated by psychological tests, interviews, and behavioral evaluations;
5. Planning and managing a program of psychological service, including psychological counseling for children and parents; and
6. Assisting in developing positive behavior strategies.

(34 CFR § 300.24(b)(9))

psychological services (Part B) - services include:

1. Administering psychological and developmental tests and other assessment procedures;
2. Interpreting assessment results;
3. Obtaining, integrating, and interpreting information about child behavior, and child and family conditions relating to learning, mental health, and development; and
4. Consulting with other staff members in planning school programs to meet the special needs of children as indicated by psychological tests, interviews, and behavioral evaluations;
5. Planning and managing a program of psychological services, including psychological counseling for children and parent(s), family counseling, consultation on child development, parent training and education programs.

(34 CFR § 303.12(d)(10))

related services - transportation and such developmental, corrective, and other supportive services as are required to assist the child with a disability to benefit from special education and includes speech-language pathology and audiology services; interpreting and transliterating; psychological services; physical and occupational therapy; recreation, including therapeutic recreation; early identification and assessment of disabilities in children; counseling services, including rehabilitation and psychological counseling; orientation and mobility services; medical services for diagnostic or evaluation purposes; school health services; social work in schools and parent counseling and training. This list of services is not exhaustive and may include other developmental, corrective, or supportive services (such as artistic and cultural programs, and art, music and dance therapy), if they are required to assist a child with a disability to benefit from special education.

(COV § 22.1-213; 34 CFR § 300.24(a))

service coordination - The activities carried out by a service coordinator to assist and enable a child eligible under Part C and the child's family to receive the rights, procedural safeguards, and services that are authorized to be provided under the State's early intervention program.

(34 CFR § 303.23)

special education - specially designed instruction, at no cost to the parent or parents, to meet the unique needs of a child with a disability, including instruction conducted in a classroom, in the home, in hospitals, in institutions, and in other settings and instruction in physical education. The term includes each of the following if it meets the requirements of the definition of special education:

1. Speech-language pathology services;
2. Vocational education; and
3. Travel training.

(COV § 221-213; 34 CFR § 300.26)

special instruction (Part C) - includes:

1. The design of learning environments and activities that promote the child's acquisition of skills in a variety of developmental areas, including cognitive processes and social interaction;
2. Curriculum planning, including the planned interaction of personnel, materials, and time and space, that leads to achieving the outcomes in the child's individualized family service plan;
3. Providing families with information, skills, and support related to enhancing the skill development of the child; and
4. Working with the child [and family] to enhance the child's development.

(34 CFR § 303.12(d)(13))

speech-language pathology services (Part C) - includes:

1. Identification of children with communicative or oropharyngeal disorders and delays in development of communication skills, including the diagnosis and appraisal of specific disorders and delays in those skills;
2. Referral for medical or other professional services necessary for the habilitation or rehabilitation of children with communicative or oropharyngeal disorders and delays in development of communication skills; and
3. Provision of services for the habilitation, rehabilitation, or prevention of communicative or oropharyngeal disorders and delays in development of communication skills.

(34 CFR § 303.12 (d)(14))

speech-language pathology services (Part B) -

Identification of children with speech or language impairments;

Diagnosis and appraisal of specific speech or language impairments;

Referral for medical or other professional attention necessary for the habilitation of speech or language impairments;

Provision of speech and language services for the habilitation or prevention of communicative impairments; and

Counseling and guidance of parents, children, and teachers regarding speech and language impairments.

(34 CFR § 300.24 (b)(14))

transportation and related costs (Part C) - include the cost of travel (e.g., mileage, or travel by taxi, common carrier, or other means) and other costs (e.g., tolls and parking expenses) that are necessary to enable a child eligible under Part C and the child's family to receive early intervention services.

(34 CFR § 303.12(d)(15))

transportation (Part B) -includes:

1. Travel to and from school and between schools;
2. Travel in and around school buildings; and
3. Specialized equipment (such as special or adapted buses, lifts, and ramps) if they are required to provide special

transportation for a child with a disability.

(34 CFR § 300.24 (b)(15))

Child's Name:

John Nguyen

IFSP Date: 3/2/01

DOB: 1/20/99

Page 7

VI. Transition Planning

| TRANSITION PLANS AND ACTIVITIES | PERSON RESPONSIBLE | DATE STARTED | DATE COMPLETED |
|--|---|---------------------|-------------------|
| <input checked="" type="checkbox"/> 1. Discuss what "transition" from early intervention means and what we can do to plan for this transition. | IFSP Team; Service Coordinator | 3/2/01 | Ongoing |
| Discussed during initial IFSP meeting. | | | |
| <input checked="" type="checkbox"/> 2. Discuss eligibility and age guidelines for early intervention so we understand when our child may no longer be eligible for early intervention services. | IFSP Team; Service Coordinator | 3/2/01 | Ongoing |
| Discussed during initial IFSP meeting. | | | |
| <input checked="" type="checkbox"/> 3. Our child's name, address, phone number and birth date will be sent to the Carter County school division no later than 4/1/01 unless we disagree. | I do not want this information transmitted _____ Par. Initials/Date | Service Coordinator | 3/2/01 |
| <input checked="" type="checkbox"/> 4. Help us explore preschool special education services as well as other community program options for our child, including: eligibility for the program, the latest date a referral may be made to the program to ensure we don't have a gap in services, and who we can talk to for more information. (Latest date: 10/20/01). | Service Coordinator | 3/2/01 | Ongoing |
| Visited local Head Start Program and Carter County special education preschool program with mother and child on 5/9/01. Mother requested referral to Carter County Schools during review meeting on 5/23/01. Mailed referral on 5/25/01 | Service Coordinator " " | 4/11/01 5/23/01 | 5/9/01 5/25/01 |
| <input checked="" type="checkbox"/> 5. Help our child begin to learn new skills needed to better get along in the new place (see Outcome (s) # 2,3,4). | IFSP Team | 3/2/01 | 8/21/01 |
| <input checked="" type="checkbox"/> 6. With our permission, provide specific information to the future service provider or program (e.g., assessment reports, IFSP, etc.) | Service Coordinator | 5/23/01 | 5/25/01 |
| Evaluation and IFSP sent with referral to the Carter Co. Schools Special Education Director on 5/25/01. | Service Coordinator | 5/25/02 | 5/25/01 |
| <input checked="" type="checkbox"/> 7. Schedule a meeting with our family, service coordinator, and someone from the new program to plan how we are going to make the transition. | Service Coordinator | 8/10/01 | 8/21/01 |
| Joint home visit with Carter County preschool teacher scheduled for 8/19/01. | | | |
| <input checked="" type="checkbox"/> 8. Help our child and family prepare for changes in services so that we can move smoothly from one program to another (e.g., meet a new teacher, visit a classroom, talk by phone to a program in the area where we are moving). | Service Coordinator | 3/2/01 | 8/21/01 |
| Additional Steps | | | |
| Called mother with information about preschool story times at library on 4/19/01. | Service Coordinator | 3/2/01 | 4/19/01 |